PATENT APPLICATION FEE DETERMINATION RECORD

Effective 10-1-2003

Application or Docket Number

		CLAIMS A	S FILED	- PART	1			SMALL E	NTITY		OTUE		1
_			(Colum	n 1)	(Colu	ımn 2)		TYPE [OR		R THAN ENTITY	
L	OTAL CLAIMS	S						RATE	FEE	7	RATE	FEE	
F	OR -		NUMBER	FILED	NUME	BER EXTRA		BASIC FE	385 .00	OR	BASIC FEE	7/7/0.0d	
Ţ	OTAL CHARGE	ABLE CLAIMS	68 mi	nus 20=	* K	CE		X\$ 9=		OR	X\$18=	3	
ΙN	DEPENDENT C	CLAIMS	8 m	inus 3 =	*			X42=	 	1	\	ŝ	
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT		. ,,,,,,,,,			-		OR			ł
*	f the difference	e in column 1 is	less than z	ero enter	r "O" in o	column 2	'	+140=		OR	+280=		
	_	CLAIMS AS A				JOIGITHT Z		TOTAL		OR	TOTAL	770	
		(Column 1)	VINIENDEI	Colur) - C		(Column 3)	ı	SMALL	ENTITY	OR	OTHER SMALL		
D.		CLAIMS REMAINING		HIGH NUM	EST		1 [ADDI-	1		ADDI-	
ENT		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
MOZ	Total	* 108	Minus	**5	4	= 14	1	X\$ 9=	<u> </u>		ب ر X\$18=	2S2	
AMENDMENT分	Independent	* 8	Minus	*** L	7	= 1	1 F	-		OR	726		
⋖	FIRST PRESE	ENTATION OF MI	JLTIPLE DE	PENDENT	CLAIM	白	1 F	X42=		OR	-×64 =	344	,
							L	+140=		OR	+280=		P
		. •					A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	596	
	KOPPOTERIOR	(Column 1)		(Colun		(Column 3)	ı _						
<u>⊢</u> B		REMAINING AFTER		NUME PREVIO	BER	PRESENT	łſ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AMENDMENT		AMENDMENT	i	PAID		EXTRA		TIALL	FEE		HAIE	FEE	
N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	}	
¥Ζ	Independent	* NTATION OF MU	Minus	***	01.444	=		X42=		OR	X84=		
	T MOT T TIESE	NIATION OF MIC	LIPLE DEF	ENDENT	CLAIM			+140=		Ī	+280=		
						<i>:</i>	L	TOTAL		OR	TOTAL		
		(Column 1)		(Calum	·- O\	(Calumia 0)	ΑI	ODIT. FEE		OR ,	ODIT. FEE		٠
		CLAIMS		(Colum	ST	(Column 3)	-			r			
N N		REMAINING AFTER		NUMB PREVIO		PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
JME	Total	AMENDMENT	Minus	PAID F	OR				FEE			FEE	
AMENDMENT	Independent		Minus Minus	**		= '	L	X\$ 9=		OR	X\$18=		
¥		NTATION OF MU	i	ENDENT	CLAIM			X42=	į.	OR	X84=	•	
			·					+140=		OR	+280=		
~~ }	t the "Highest Nun	nn 1 is less than the nber Previously Pai	d For" IN THIS	SPACE is	less than	20 enter *20 *	L	TOTAL			TOTAL		
нин	the "Highest Nur	nber Previously Paid ber Previously Paid	id For" IN THIS	S SPACE is	less than	3. enter "3."	70	DIT. FEE		^	DDIT. FEE L mn 1		;
	•	•	,		.,	· · · · · · · · · · · · · · · · · · ·		a.o appi	Shire DOX				į

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PAICNI	AFFLIL	AIIUI				ILCOLIC

Effective December 29, 1999

Application or Docket Number

9/533517

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL E		OR	OTHER SMALL E	
FO	R .	NUMBE		NUMBER E		ŗ	RATE	FEE	<u>С</u> Г	RATE	FEE
BAS	SIC FEE					T	4, + 1.	345.00	OR		690.00
то	TAL CLAIMS		(6 minus 20	= * 26			X\$ 9=		OR	X\$18=	468
IND	EPENDENT CL	AIMS	4 minus 3	= *			X39=		OR	X78=	78
MU	LTIPLE DEPENI	DENT CLAIM PR	ESENT		!		+130=		OR	+260=	
* If	If the difference in column 1 is less than zero, enter "0" in column 2					L	TOTAL		OR	TOTAL	1236
i	CI	_AIMS AS A (Column 1)	MENDED -	(Column 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	.54	Minus	46	=8		X\$ 9=		OR	X\$18=	144
AME	Independent	· 4	Minus	*** Y	=	F	X39=		OR	X78≡	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEPE	ENDENT CLAIM			+130=		OR	+260=	
				.′		L	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	144
		(Column 1)		(Column 2)	(Column 3)		100ii. i		_		
AMENDMENT B	11/21/03	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ā	Total	. 54.	Minus	54,	= .		X\$ 9=		OR	X\$18=	
AME	Independent	. 4	Minus	*** 4	=		X39=		OR	X/8=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDENT CLAIM		ا ا	+130=		OR	+260=	
						L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)	_	40011.1 22			700	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
MEI	Independent	*	Minus	***	=]	X39=		OR	X78=	
F	FIRST PRESE	ENTATION OF M	ULTIPLE DEP	ENDENT CLAIM	1	¹ ├	+130=		1	+260=	
۱.	If the entry in colu	ımn 1 is less than t	he entry in colur	nn 2, write "0" in c	olumn 3.	. [TOTAL		OR	TOTAL	
::	*If the "Highest No	umber Previously P umber Previously F mber Previously Pa	Paid For" IN THIS	S SPACE is less th	an 3, enter "3."		ADDIT. FEE		OR x in co	ADDIT. FEE	

This imrm is for INTERNAL POO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:	9/533517	
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FORM OIPE-RAM-01 (Rev. 12/97)

Total Fee Calculation

		rotaire	Calculation	2		
	Fee Cade	Taul # Claims	Number X	Fee	Fee	- Total
	Sca./Lg.			Sm. Entity	Le Entry	
Basic Filing Fee	201/101				690	•
Total Claims >20	201/101	46 -20 -	<u>26</u> x		468	
Independent Claim: >]	202/102	4 .1-	x		78	
Mult. Dep Claim Present	204/104			·		4
Surcharge	205/105				130	•
English Translation	139 .					
TOTAL FEE CALCULA	MOIT					1366
Fees due upon filing th	te application.				•	
Total Filing Fees Due	= 5	1366				
Less Filing Fees Subm	ined - \$	Ø				
BALANCE DUE	= \$	1366				
Office of Initial Patent I	Examination					
		Figo	ire 7			